



AGENCY OF HUMAN SERVICES

DEPARTMENT OF DISABILITIES, AGING AND INDEPENDENT LIVING

Division of Licensing and Protection

HC 2 South, 280 State Drive

Waterbury, VT 05671-2060

<http://www.dail.vermont.gov>

Survey and Certification Voice/TTY (802) 241-0480

Survey and Certification Fax (802) 241-0343

Survey and Certification Reporting Line: (888) 700-5330

To Report Adult Abuse: (800) 564-1612

January 17, 2019

Ms. Marlene Ringer, Manager
Ringer's Home Care
195 Green Street
Vergennes, VT 05491

Dear Ms. Ringer:

Enclosed is a copy of your acceptable plans of correction for the survey conducted on **November 19, 2018**. Please post this document in a prominent place in your facility.

We may follow-up to verify that substantial compliance has been achieved and maintained. If we find that your facility has failed to achieve or maintain substantial compliance, remedies may be imposed.

Sincerely,

A handwritten signature in black ink that reads "Pamela M. Cota RN".

Pamela M. Cota, RN
Licensing Chief

PRINTED: 11/28/2018
FORM APPROVED

Division of Licensing and Protection

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 0350	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 11/19/2018
NAME OF PROVIDER OR SUPPLIER RINGER'S HOME CARE		STREET ADDRESS, CITY, STATE, ZIP CODE 195 GREEN STREET VERGENNES, VT 05491	
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)
R100	Initial Comments:	R100	
	An unannounced on-site re-licensure survey was completed by the Division of Licensing and Protection on 11/19/18. The following regulatory violations were found.		
R104 SS=C	V. RESIDENT CARE AND HOME SERVICES	R104	
	5.1 Admission		
	5.2.a Prior to or at the time of admission, each resident, and the resident's legal representative if any, shall be provided with a written admission agreement which describes the daily, weekly, or monthly rate to be charged, a description of the services that are covered in the rate, and all other applicable financial issues, including an explanation of the home's policy regarding discharge or transfer when a resident's financial status changes from privately paying to paying with SSI or ACCS benefits. This admission agreement shall specify at least how the following services will be provided, and what additional charges there will be, if any: all personal care services; nursing services; medication management; laundry; transportation; toiletries; and any additional services provided under ACCS or a Medicaid Waiver program. If applicable, the agreement must specify the amount and purpose of any deposit. This agreement must also specify the resident's transfer and discharge rights, including provisions for refunds, and must include a description of the home's personal needs allowance policy.		
	(1) In addition to general resident agreement requirements, agreements for all ACCS participants shall include: the ACCS services, the specific room and board rate,		

Division of Licensing and Protection

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

STATE FORM

C02U11

If continuation sheet 1 of 5

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R104	Continued From page 1 the amount of personal needs allowance and the provider's agreement to accept room and board and Medicaid as sole payment. This REQUIREMENT is not met as evidenced by: Based on staff interview and record review, the admission agreement used by the home stated (incorrectly) that all residents were required to have a petty cash account managed by the facility as part of the admission agreement. This process affected all current residents of the home. (Residents #1 - 9). Also, the admission agreement language failed to include the information on a resident's right to appeal an involuntary discharge notice and information on the appeal process. Findings include: 1. Per review of the admission agreements on 11/19/18, the wording in the agreement stated that all residents must have a petty cash account managed by the facility, in the amount of \$2.00. Per review, the home's Admission Agreement wording stated: under I. Personal Finances: "Each resident is required to maintain a petty cash account with a minimum of eighty-two (\$82.00). This is a Vermont requirement." When interviewed regarding this language at 2 PM, the owner confirmed that s/he had not fully understood the requirements under the State's Medicaid programs, as discussed with the surveyor on at 2 PM on 11/19/18. The owner said that they were under the impression that all residents had to have such an account related to state funding processes in place (i.e., waiver programs). 2. Per review of the facility's admission agreement on 11/19/18, the agreement fails to		R104	Ringer's Home Care's Admission Agreement + has been updated and corrected with the appropriate language per State's regulations, to include: # 1 Personal Needs Allowance pg. 18 # 2 Resident's right to appeal and the information regarding discharges and transfers. pg 5-7 Ringer Home Care Administrator to monitor placement of Agreement in resident charts R104 POC accepted 1/14/19 May Bolter, RN	11/09/19

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R104	Continued From page 2 disclose the reasons allowed for an involuntary transfer from the home, and failed to include the specific reasons allowed and the right to appeal the transfer and stay in the home during the appeal, in accordance with the Vermont regulations. The admission contract as written contained incomplete information of the involuntary process and the resident's rights regarding this process. The admission agreement omission(s) were confirmed per interview with the owner and the Nurse on duty on 11/19/18 at 2 PM.	R104	Ringer Home Care Inc will have all residents and/or legal representative review and sign the new admission agreement by 01/15/19	01/15/19
R188 SS=C	V. RESIDENT CARE AND HOME SERVICES 5.12.b(2) A record for each resident which includes: resident's name; emergency notification numbers; name, address and telephone number of any legal representative or, if there is none, the next of kin; physician's name, address and telephone number; instructions in case of resident's death; the resident's assessment(s); progress notes regarding any accident or incident and subsequent follow-up; list of allergies; a signed admission agreement; a recent photograph of the resident, unless the resident objects; a copy of the resident's advance directives, if any completed; and a copy of the document giving legal authority to another, if any. This REQUIREMENT is not met as evidenced by: Based on staff interview and record review, the facility failed to assure that all resident records	R188	All Admission Agreements in their entirety will be placed in charts. The current Agreements have been placed in charts as will the revised version dated 01/09/19 R 188 - POC accepted 1/14/19 Mary Dalton RW	11/26/18

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R188	Continued From page 3 were complete as stated in the regulations. This finding affected all residents of the home. (Residents #1- 9). Findings include: Per review of a sample of 3 resident records, none of the records included a full copy of the signed admission agreements. Per interview with the owner on the afternoon 11/19/18, the owner stated that they gave the admission agreement signed copies to the residents/responsible parties to keep and the facility kept only copies of the signed/dated pages of the admission agreements.	R188	See page 3
R313 SS=C	XI. RESIDENT FUNDS AND PROPERTY 11.1 A resident's money and other valuables shall be in the control of the resident, except where there is a guardian, attorney in fact (power of attorney), or representative payee who requests otherwise. The home may manage the resident's finances only upon the written request of the resident. There shall be a written agreement stating the assistance requested, the terms of same, the funds or property and persons involved. This REQUIREMENT is not met as evidenced by: Based on interview and record review, the facility failed to implement a form to show a written agreement from the resident/responsible person requesting that the facility manage the resident's funds. This issue affected all residents of the home with funds managed by the home. (Residents 1 - 9). Findings include: Per review of the admission agreements for a	R313	Personal needs Allowance 01/09/19 pages have been added to Admission Agreement. See page 18-Doc #2 and page 19-Doc #3

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R313	Continued From page 4 sample of 3 residents, the admission agreements stated that all residents must have a resident petty cash account managed by the facility. Although it was confirmed that all 9 current residents had a petty cash account managed by the home, there were no signed requests by the residents/responsible parties available and no process used by the facility for this purpose. The owner confirmed during interview on 11/19/18 at 2:05 PM, that they were not previously aware of the requirement for a written request from the resident/responsible party in order for the home to manage the resident's funds.	R313	<p>All current residents and/or legal representatives will be given a copy of Ringer Home Care's new admission agreement dated 01/09/2019. The agreement includes the Personal Needs Allowance update as well as other changes as noted previously.</p> <p>R 313 POC accepted 11/14/19 May Bolton, RW</p>		

Division of Licensing and Protection
STATE FORM

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If continuation sheet 5 of 5